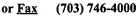


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as a property of the current correspondence address and notification of maintenance fees will be mailed to the current correspondence address as a constant of the current correspondence address.

| maintenance fee notification | | in Block I, by (a) | specifying | a new co | rrespondence address | ; and/or (b) indicating a sepa | itate FEE ADDRESS for | |
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| CURRENT CORRESPONDENCE | CE ADDRESS (Note: Use Block 1 for | any change of address) | | | Fee(s) Transmittal Th | mailing can only be used for its certificate cannot be used all paper, such as an assignment | for any other accompanying | |
| 23364 7 | 590 05/17/2005 | | | | have its own certificat | al paper, such as an assignme e of mailing or transmission. | | |
| BACON & THO | MAS, PLLC | 100 | | | Cer | rtificate of Mailing or Trans | smission | |
| 625 SLATERS LA | | OIPE | | | I hereby certify that the States Postal Service | his Fee(s) Transmittal is bein with sufficient postage for fir | st class mail in an envelope | |
| FOURTH FLOOR | | | | | I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. | | | |
| ALEXANDRIA, V | /A 22314 | III A A DOOR | , ' | | | 10 (/00) 1 10 /000, 000 | (Depositor's name) | |
| Attn: Eugene Mar JUL 1 1 2005 | | | | | | | (Signature) | |
| | ie Mai | i. at | ¥. | | | | (Date) | |
| APPLICATION NO. | FILING DATE | 3 70 000 | FIRST NAMED INVENTOR | | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/791,907 | 03/04/2004 | | Katsunobu Haman | | oto | Н АМА3009/ЕМ | 4471 | |
| TITLE OF INVENTION: D 13/2005 NBEYENE2 000 | DISCHARGE LAMP LIGHT 00129 10791907 | ING DEVICE ANI | LIGHTING | G APPAR | ATUS | | | |
| FC:1501 | 1400.00 OP | | | | | | | |
| FC: 150PPLN. TYPE | SMALL ENTRY | ISSUE FI | EE | PUBLICATION FEE | | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | | | \$300 | \$1700 | 08/17/2005 | |
| EXAMINER | | ART UNIT | | CL | ASS-SUBCLASS |] . | | |
| DINH, TRINH VO | | 2821 | | | 315-20000R | | | |
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| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | | | |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | (2) the name of a single firm (having as a member a 2 | | | | | |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custo Number is required. | | | registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| 3. ASSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON T | HE PATEN | Г (print o | r type) | | | |
| PLEASE NOTE: Unless recordation as set forth in | s an assignee is identified be n 37 CFR 3.11. Completion of | clow, no assignee of this form is NOT | data will app a substitute | ear on the | ne patent. If an assign g an assignment. | nee is identified below, the d | locument has been filed for | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | |
| Matsushita Electric Works, Ltd. Osaka, Japan | | | | | | | | |
| Please check the appropriate | e assignee category or catego | ries (will not be pri | nted on the p | oatent) : | ☐ Individual 🚨 C | orporation or other private gr | oup entity Government | |
| 4a. The following fee(s) are | enclosed: | 45 | . Payment of | | | | | |
| Issue Fee | | | _ | | ount of the fee(s) is er | | | |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | | | | | | |
| Advance Order - # 0 | f Copies | | Deposit Acc | ount Nur | $\begin{array}{ccc} \begin{array}{cccc} \text{dereby authorized by c} \\ \text{obser} & 02-020 \end{array}$ | narge the required fee(s), or (enclose an extra c | copy of this form). | |
| 5. Change in Entity Status | (from status indicated above | | | | | | | |
| a. Applicant claims S | MALL ENTITY status. See | 37 CFR 1.27. | b. Applic | cant is no | longer claiming SMA | LL ENTITY status. See 37 C | FR 1.27(g)(2). | |
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| Authorized Signature | | | | | Date | July 1 | 1. 2005 | |
| Typed or printed name _ | Eugene M | Mar | | _ | | No. 25,893 | • | |
| This collection of information | on is required by 37 CFR 1.3 | 11. The information | n is required | to obtain | or retain a benefit by | the public which is to file (an | d by the USPTO to process) | |

an approximate to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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07/



INREAPPLICATION OF:

KATSUNOBU HAMAMOTO ET. AL.

SERIAL NO.: 10/791,907

FILED: March 4, 2004

FOR: Discharge Lamp Lighting Device And Lighting

Apparatus

GROUP ART UNIT: 2821

EXAMINER: Trinh Vo Dinh

ATTY. REFERENCE: HAMA3009/EM

COMMISSIONER OF PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

| Sir: | |
|--|----------------------|
| The below identified communication(s) or document(s) is(are) submitted in the above applicate | ion or proceeding: |
| ☑ Issue Fee Transmittal | |
| ☑ Check in the Amount of \$1,700.00 (\$1,400- IF; \$300- PF) | |
| | |
| | |
| | |
| ☐ Please debit or credit Deposit Account Number 02-0200 for any deficiency or surplus in communication. | connection with this |
| ☐ Small Entity Status is claimed. | |

23364 CUSTOMER NUMBER

BACON & THOMAS, PLLC 625 Slaters Lane- Fourth Floor Alexandria, Virginia 22314 (703) 683-0500

Date: July 11, 2005

Respectfully submitted,

Eugene Mar
Attorney for Applicant

Registration Number: 25,893